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23552 7590 03/22/2002
MERCHANT & GOULD PC
P.O. BOX 2903
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John Junkers	(Depositor's name)
<i>John Junkers</i>	
June 20, 2002	

D9 254,310

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/254,310	12/16/1999	GERT BLANKENSTEIN	5799.130USWO	6792

TITLE OF INVENTION: MICRO-FLOW SYSTEM FOR PARTICLE SEPARATION AND ANALYSIS

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
30	nonprovisional	NO	\$1280	\$0	\$1280	06/24/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHIN, CHRISTOPHER L	1641	435-004000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Merchant & Gould PC

1. _____
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SCANDINAVIAN MICRO BIODEVICES A/S

LUNGY, DENMARK

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee
 Advance Order - # of Copies 2

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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

John J. Gresens (33,112) *John Gresens* June 20, 2002

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PTOL-85 (REV. 07-01) Approved for use through 01/31/2004. OMB 0651-0133

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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01 FC:142 1280.00 0P

02 FC:561 6.00 0P